## **EIA-Funded Program Name:**

* Current Fiscal Year EIA Allocation to this EIA-Program:
* Name of Person Completing Survey and to whom EOC members may request additional information:
* Telephone number:
* E-mail:

## History of the program. Please mark the appropriate response (choose one):This program:

Was an original initiative of the Education Improvement Act of 1984

Was created or implemented as part of the Education Accountability Act of 1998

Has been operational for less than five years

Was funded by last fiscal year by general or other funds.

Is a new program implemented for the first time in the current fiscal year

Other

What SC laws, including provisos in the current year's general appropriation act, govern the implementation of this program? Provide complete citations from the SC Code of Laws including Title, Chapter, and Section numbers.

Code of Laws:(MAX. 100 characters)		
Proviso Number:(MAX: 100 characters)		
1A 69		

What South Carolina regulations govern the implementation of this program? Provide specific references to the South Carolina Code of Regulations? Regulations:

Do guidelines that have been approved by the State Board of Education, the Commission on higher Education or other governing board exist that govern the implementation of this program?

Yes

No

What are the primary objective(s) or goals of this program? Please distinguish between the long-term mission of the program and the current annual objectives of the program. (The goals or objectives should be in terms that can be quantified, evaluated and assessed.) (MAX 3500 characters)

The goal of Public Choice Innovation Schools is to demonstrate leadership in instructional, administrative or personnel practices yielding strong student academic achievement. A grant program will be established to support the creation of Public Choice Innovation Schools in South Carolina and to provide for their evaluation. These schools are public choice alternatives for grade 4-8 students enrolled in the public schools rated Unsatisfactory or Below Average or students enrolled in public schools rated Average or above and who scored Basic or below on any two or more subject area grade level PACT assessments in grades 3-7 during the most recent school year. Applicants must demonstrate at least one of the following strategies in improving leadership and academic achievement: changes in teacher compensation to address geographic or certification barriers and/or to offer performance incentives; utilization of novel leadership and administrative policies and procedures, to include preparation and certification of administrators, operational procedures and costs shared with other entities; continuous progress of students between grades 4-8; virtual delivery of substantial portions of the curriculum; and novel or non-traditional uses of time, space and technology in the instructional delivery of state academic content standards; or a combination of these strategies.

In the prior fiscal year, what primary program activities or processes were conducted to facilitate the program's performance in reaching the objective(s) as provided in question 7? What, if any, change in processes or activities are planned for the current fiscal year? (Examples of program processes would be: training provided, recruiting efforts made, technical assistance services, monitoring services, etc. Answers should be specific to the process undertaken at the state level to support the objectives of the program and should be quantifiable Please include any professional development services provided.) (MAX: 5000 characters)

This is a new program that did not exist last fiscal year.

In the prior fiscal year and using the most recent data available, what were the direct products and services (outputs) delivered by this program? (Examples of program outputs would be: number of teachers attending professional development seminars, number of AP exams given and students taking AP classes, number of students served in the program, etc.)(MAX: 5000 characters)

This is a new program that did not exist last fiscal year.

What are the outcomes or results of this program? (Program outcomes can be both quantitative and qualitative and should address the program's objectives. Please use the most recent data available. Examples of outcomes would be: results of surveys, test data, increase in minority participation, reduction in achievement gaps, teacher loans awarded, textbooks purchased, etc.)(MAX: 5000 characters)

An independent longitudinal evaluation of Public Choice Innovation Schools is to be conducted or contracted by the Education Oversight Committee and must include a value-added component so that valid comparisons can be made to student performance in traditional public schools and public charter schools.

## **Program Evaluations**

What was the date of the last external or internal evaluation of this program?

Has an evaluation been conducted?

Yes No

If an evaluation was conducted, what were the results and primary recommendations of the evaluation? (MAX: 2000 characters)

Can you provide a URL link, electronic version or hard copy of this evaluation to the Education Oversight Committee?

Yes

No

If no, why not?(MAX: 100 characters)

The following questions do NOT apply to programs having a program code beginning with 01. (These are programs administered by or through the Department of Education. The Office of Finance at the Department of Education will provide answers to these questions.) If your program code begins with 01, please hit the NEXT button below. Once you advance to the next page, hit the SUBMIT button.

Please mark the appropriate response:

## The total amount of EIA funds requested for this program for the next fiscal year will be:

The same as appropriated in the current fiscal year's appropriation

An increase over the current fiscal year's appropriation

A decrease over the current fiscal year's appropriation

If you indicated an increase or decrease in funding for the next fiscal year, what is the total amount requested for this program for the next fiscal year?

If you indicated an increase or decrease, please describe the reasons for the increase or decrease. How will the increase or decrease impact the objectives of the program as answered in question 7?(MAX: 3500 characters)

Please fill in the attached charts to reflect the budget for this program in the prior fiscal year and the budget for this program in the current fiscal year.

Funding Source	Prior FY Actual	Current FY Estimated

Funding Source	Prior FY Actual	Current FY Estimated
EIA		
General Fund		
Lottery		
Fees		
Other Sources		
Grant		
Contributions, Foundation		
Other (Specify)		
Carry Forward from Prior Yr		
TOTAL		

Expenditures	Prior FY Actual	Current FY Estimated
Personal Service		
Contractual Services		
Supplies and Materials		
Fixed Charges		
Travel		
Equipment		
Employer Contributions		
Allocations to Districts/Schools/Agencies/Entities		
Other: Please explain		
Balance Remaining		
TOTAL		
#FTES		

Data entry complete for this year.

Will additional information (eg. charts, tables, graphs, etc.) be submitted under separate cover to EOC for this program? If so, submit to Melanie Barton at mbarton@eoc.sc.gov. The program number should be cited in the subject of the e-mail.

Yes No